

OBSERVED EYE RESPONSES/VISUAL BEHAVIORS: (check each item observed)

INSTRUCTIONS: Begin testing at approximate developmental age.

Complete at least 3 consecutive sections, identifying both a baseline and ceiling according to assessment protocol.

Yes	No	BIRTH:
<input type="checkbox"/>	<input type="checkbox"/>	Responds to movement or light with a blink reflex
<input type="checkbox"/>	<input type="checkbox"/>	Pupil responds to light on/off
<input type="checkbox"/>	<input type="checkbox"/>	Makes momentary eye contact
Comments _____		

Yes	No	1 MONTH:
<input type="checkbox"/>	<input type="checkbox"/>	Turns head & eyes to light source
<input type="checkbox"/>	<input type="checkbox"/>	Regards face
<input type="checkbox"/>	<input type="checkbox"/>	Follows movement horizontally, either side of midline
Comments _____		

Yes	No	2 MONTHS:
<input type="checkbox"/>	<input type="checkbox"/>	Turns head to objects/lights on either side
<input type="checkbox"/>	<input type="checkbox"/>	Stares at objects or people
<input type="checkbox"/>	<input type="checkbox"/>	Social smile in response to a smile from another
Comments _____		

Yes	No	3 MONTHS:
<input type="checkbox"/>	<input type="checkbox"/>	Follows object (tracks) 180 degrees
<input type="checkbox"/>	<input type="checkbox"/>	Regards own hands
<input type="checkbox"/>	<input type="checkbox"/>	Follows movement of people & objects
Comments _____		

Yes	No	4 MONTHS:
<input type="checkbox"/>	<input type="checkbox"/>	Glances from one object to another
<input type="checkbox"/>	<input type="checkbox"/>	Uses vision to reach towards 1" object at 12"
<input type="checkbox"/>	<input type="checkbox"/>	Looks at 4" – 6" object at 3 feet
Comments _____		

Yes	No	BY 6 MONTHS:
<input type="checkbox"/>	<input type="checkbox"/>	Watches rolling tennis ball at 10 feet
<input type="checkbox"/>	<input type="checkbox"/>	Uses vision to reach directly to object
<input type="checkbox"/>	<input type="checkbox"/>	Over reaches <input type="checkbox"/> Under reaches
<input type="checkbox"/>	<input type="checkbox"/>	Uses eyes together
Comments _____		

Yes	No	BY 9 MONTHS:
<input type="checkbox"/>	<input type="checkbox"/>	Looks for fallen toy
<input type="checkbox"/>	<input type="checkbox"/>	Eyes converge on moving toy to within 4" of face
<input type="checkbox"/>	<input type="checkbox"/>	Watches activity of adults 15 – 20 feet
Comments _____		

Yes	No	BY 12 MONTHS:
<input type="checkbox"/>	<input type="checkbox"/>	Recognizes familiar object (bottle, toy) at 8-10'
<input type="checkbox"/>	<input type="checkbox"/>	Looks at pictures in a book
<input type="checkbox"/>	<input type="checkbox"/>	Looks at/picks up small object (raisin, cereal)
Comments _____		

Yes	No	BY 18 MONTHS:
<input type="checkbox"/>	<input type="checkbox"/>	Uses vision to tower 3, 1 inch cubes
<input type="checkbox"/>	<input type="checkbox"/>	Looks at/points to pictures named
<input type="checkbox"/>	<input type="checkbox"/>	Attends to 2" – 3" stationary object at 10 feet
Comments _____		

Yes	No	BY 24 MONTHS:
<input type="checkbox"/>	<input type="checkbox"/>	Imitates facial and hand movements
<input type="checkbox"/>	<input type="checkbox"/>	Walks confidently in unfamiliar or varying surfaces
<input type="checkbox"/>	<input type="checkbox"/>	Visually locates identical objects (begins matching)
Comments _____		

Yes	No	BY 30 to 36 MONTHS:
<input type="checkbox"/>	<input type="checkbox"/>	Recognizes self in photo/mirror
<input type="checkbox"/>	<input type="checkbox"/>	Imitates actions (finger plays, on, under, behind)
Comments _____		

NOTES/CONCERNS: _____
